PART B - FEE(S) TRANSMITTAL

plicable fee(s), to: Mail Complete and send this form, together with

Mail Stop ISSU Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/302,867 04/30/1999 ALEXANDER Y. TOKMAN 56967.010 7572 TITLE OF INVENTION: VARIABLE CABLE LENGTH COMPENSATOR FOR VIDEO IMAGING SYSTEMS APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 12/09/2004 EXAMINER ART UNIT CLASS-SUBCLASS REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 CPR 1.563).	indicated unless corrected by maintenance fee notification		in Block 1, by (a)	specifying a	new co	rrespondence address;	and/or (b) indicating a sepa	arate "FEE ADDRESS"
O/O4/2004 HBERESS2 00000032 09302867 Signat O/O4/2004 HBERESS2 00000032 09302867 O/O4/2004 HBERESS2 00000000032 09302867 O/O4/2004 HBERESS2 00000000000000000000000000000000000	75 INTELLECTUAL DEWITT ROSS & FIRSTAR FINANC	09/09/2004 L PROPERTY DEPA STEVENS S C CIAL CENTRE	ARTMENT (ICI o.	S Julie	Cer	tificate of Mailing or Trans	emission
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/302,867 04/30/1999 ALEXANDER Y. TOKMAN 56967.010 7572 TITLE OF INVENTION: VARIABLE CABLE LENGTH COMPENSATOR FOR VIDEO IMAGING SYSTEMS APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 12/09/2004 EXAMINER ART UNIT CLASS-SUBCLASS REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 CFR J.361). Change of correspondence address or Change of Correspondence Address for PTO/SBA17, Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: CITY and STATE OR CUNTRY) General Electric Company Schemet will be printed. (B) RESIDENCE: (CITY and STATE OR CUNTRY) Schemectady, New York Please check the appropriate assignee categories (will not be printed on the patent): Individual Corporation or other private group entity Government and the control of this form. In Payment of Fee(s): Ab Payment by credit card, Form PTO-2038 is attached.	MADISON, WI 53		TRADES	•	Marcia Lay	ton	(Depositor's na	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.	.0/04/2004 HDEMESS2 000				Marcia	Lauten	(Signat	
O9/302,867 O4/30/1999 ALEXANDER Y. TOKMAN 56967.010 7572	01 FC:1501	1330.00 OP			[28 5	eptember 200	(P
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 12/09/2004 EXAMINER ART UNIT CLASS-SUBCLASS REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Specificate address) and the names of up to 3 registered patent attorneys or agents OR, alternatively or agents OR, alternatively or agents (or agents) and the names of up to 3 registered patent attorneys or agents OR, alternatively or agents OR, alt	APPLICATION NO.	FILING DATE	FIRST NAMED		D INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 12/09/2004 EXAMINER ART UNIT CLASS-SUBCLASS REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. "Fee Address" indication for "Fee Address" Indication form PTO/SB/122) attached. "Fee Address" indication for "Fee Address" Indication form PTO/SB/122) attached. "See Address" indication form PTO/SB/122) attached. "See Address" indication form PTO/SB/122) attached. "See Address" indication form PTO/SB/122 attached. "A check in the ammount of the fee(s) is enclosed. "A check in the ammount of the fee(s) is enclosed. "A check in the ammount of the fee(s) or credit any overpayment PL	09/302,867	04/30/1999	ALEXANDER Y. TOK			MAN	56967.010	7572
REAMINER ART UNIT CLASS-SUBCLASS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE I		PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address fundication (or "Fee Address" Indication form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) General Electric Company Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: Advance Order - # of Copies Advance Order - # of Copies EXAMINER ART UNIT CLASS-SUBCLES (1) the names of up to 3 registered patent attorneys or agents and member a registered attent of a single firm (having as a member a registered attent attorneys or agents. If no name is listed, no name will be printed. 2. For printing on the patent front page, list (1) the names of up to 5 to gistered attented attorneys or agents and embers or agents. If no name is listed, no name will be printed. 2. DeWitt Ross & Stevens 2. DeWitt Ross & Stevens 3. SIGNE ENDE CHIEF CORD ATA TO BE PRINTED ON THE PATENT (print or type) The Director is negative attention of a single firm (having as a member a registered attent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) The Director is negative attention of the patent. If an assignee is identified below, the document has been			\$1330			\$0	\$1330	12/09/2004
REKSTAD, ERICK J 2613 348-162000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) General Electric Company Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: Advance Order - # of Copies							1	12.09.2001
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) General Electric Company Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): I Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055	EXAMINER		ART UNIT		CL.			
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) General Electric "Company Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055.	REKSTAD), ERICK J	2613			348-162000		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).	CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 (Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: Lissue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).					•	** /		
General Electric Company Schenectady, New York Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm 4a. The following fee(s) are enclosed: Lissue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Advance Order - # of Copies Deposit Account Number 18-2055 Schenectady, New York Corporation or other private group entity Governm 4b. Payment of Fee(s): Payment of Fee(s) is enclosed. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).	PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will app Ta substitute	ear on the	e patent. If an assigr an assignment.	nee is identified below, the	document has been filed
Please check the appropriate assignee category or categories (will not be printed on the patent):	(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
4a. The following fee(s) are enclosed: Let Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Deposit Account Number 18-2055 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.	General Ele	ectric Company		Schene	ctady	, New York		
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).	Please check the appropriate	assignee category or category	ories (will not be pri	nted on the p	oatent):	Individual 🖺 C	orporation or other private gr	roup entity Governm
Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).	4a. The following fee(s) are enclosed:			*				
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-2055 (enclose an extra copy of this form).				_				
Deposit Account Number 18-2055 (enclose an extra copy of this form).								
5. Change in Entity Status (from status indicated above)				Deposit Acc	ector is h count Nun	ereby authorized by conber 18-2055	narge the required fee(s), or concluse an extra	copy of this form).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Øraig A. Fieschko

Z8 SEPT

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

S.

39,668 Registration No.

Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.